

07/11/95 16:00 FAX-T CORP. AGENTS 001

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CHARGED, PLEASE ENTER YOUR PASSWORD. TO ABANDON THIS PROCESS, ENTER 'N'.

7/11/95 FLORIDA DIVISION OF CORPORATIONS 8:41 AM
PUBLIC ACCESS SYSTEM
(((H95000007640))) ELECTRONIC FILING COVER SHEET
TO: DIVISION OF CORPORATIONS FROM: FAG-T CORP. AGENTS, INC.
DEPARTMENT OF STATE 8405 NW 53RD ST
STATE OF FLORIDA SUITE C-100
409 EAST GAINES STREET MIAMI FL 33166- 83- 0-0000
TALLAHASSEE, FL 32399 CONTACT: LIDIA FERNANDEZ
FAX: (904) 922-4000 PHONE: (305) 399-0839
FAX: (305) 392-9591

(((H95000007640))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: MULTICARGA INTERNATIONAL CORP.
FAX AUDIT NUMBER: H95000007640 CURRENT STATUS: REQUESTED
DATE REQUESTED: 07/11/1995 TIME REQUESTED: 08:41:53
CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0
NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX
ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 071001002335

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** ENTER 'M' FOR MENU. **

7/11/95 FLORIDA DIVISION OF CORPORATIONS 8:42 AM
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Handwritten signature and date 7/12

FILED
55 JUL 11 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
55 JUL 11 PM 4:06
DIVISION OF CORPORATIONS

H95000007640

ARTICLES OF INCORPORATION

OF

MULTICARGA INTERNATIONAL CORP.

FILED
JUL 11 1995
CLERK OF COURT
MIAMI, FL

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: MULTICARGA INTERNATIONAL CORP.

The principal place of business of this corporation shall be: 8201 N.W. 8th St. Suite 410
Miami, FL 33126

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 Shares \$10.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Alirio J. Ramirez

8201 N.W. 8th St. Suite 410
Miami, FL 33126

Prepared by: Alirio J. Ramirez
8201 N.W. 8th St.
Suite 410
Miami, FL 33126
(305) 205-7199

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ARTICLE VI INCORPORATOR(S)

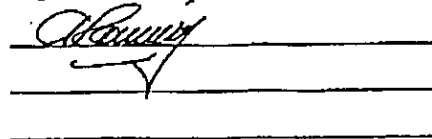
The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

Alirio J. Ramirez

8201 N.W. 8th St. Suite 410
Miami, FL 33126

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 11th day of July, 1995

Signature(s) of Incorporator(s)



STATE OF Florida
COUNTY OF Dade

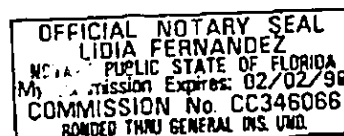
THE FOREGOING instrument was acknowledged and sworn to before me this 11th day of July, 1995 by Alirio J. Ramirez (El driver's license # R562-010-46-374-0)
(Name of Incorporator)
of Multicarga International Corp.
(Name of Corporation)

Notary Public


My Commission Expires: _____

(SEAL)

ARTICLES OF INCORPORATION FILING FEE:



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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: MULTICARGA INTERNATIONAL CORP.

2. The name and address of the registered agent and office is:

Alirio J. Ramirez
(P.O. BOX NOT ACCEPTABLE)

8201 N.W. 8th St. Suite 410

(CITY/STATE/ZIP)

Miami, Florida 33126

SIGNATURE

(corporate officer)

TITLE

PRESIDENT

DATE

06/19/95

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE

06/19/95

REGISTERED AGENT FILING FEE:

H95000007640